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SERIAL NUMBER 10/601,917	FILING DATE 06/19/2003 RULE	CLASS 602	GROUP ART UNIT 3743	ATTORNEY DOCKET NO. 3063
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APPLICANTS

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** CONTINUING DATA *****

JW

** FOREIGN APPLICATIONS *****

JW

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 09/08/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY ID	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>Amanda Weber JW</i> Examiner's Signature Initials		7	20	3

ADDRESS

035459
 ROBERT FROHWERK
 551 CLEARVUE DRIVE
 MERIDIAN, ID
 83642

TITLE

Orthopedic device allows kneeling without contact to the knee and protects other joints

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
RECEIVED 375		